

**CERTIFICATION OF COMPLIANCE WITH
THE NET NEGOTIATED AMOUNT CONTRACT
BETWEEN THE CALIFORNIA DEPARTMENT OF ALCOHOL AND DRUG
PROGRAMS (“THE STATE”)
AND _____ COUNTY (“THE COUNTY”)**

I hereby certify *under penalty of perjury* that the attached six (6) certifications, and all attachments, are true and correct. Signed in _____ County, California.

Signature

Date

Title

Print Name: _____

CERTIFICATION REGARDING PAYMENT OF LAST RESORT*

(Complete *either* items 1 and 2; *or* 3, including all attachments for 3.)

1) ☐ I certify that this County has in place policies, procedures, and practices to ensure compliance with the terms of the Net Negotiated Amount (NNA) contract with regard to expenditure of SAPT BG funds as the "payment of last resort" for services for Pregnant and Parenting Women, Tuberculosis, and HIV.

AND

2) ☐ **I certify:**

☐ that this County has in place policies, procedures, and practices to ensure that its AOD treatment subcontractors are in compliance with the above requirements;

OR

☐ that certification regarding treatment subcontractors is not applicable because this County does not subcontract for any AOD treatment services.

3) ☐ I cannot certify that this County has in place policies, procedures, and practices to ensure compliance with the terms of the Net Negotiated Amount (NNA) contract with regard to expenditure of SAPT BG funds as the "payment of last resort" for services for Pregnant and Parenting Women, Tuberculosis, and HIV. Attached is:

a) A statement of the reasons why the requirements are not met, **AND**

b) A corrective action plan, detailing actions to be completed within 60 days of the date of this document. (Attach pages.)

*Title 45, Code of Federal Regulations, Part 96, Section 96.137 states:

(a) The Block Grant money that may be spent for Secs. 96.124(c) and (e), 96.127 and 96.128 is governed by this section which ensures that the grant will be the "payment of last resort." The entities that receive funding under the Block Grant and provide services required by the above-referenced sections shall make every reasonable effort, including the establishment of systems for eligibility determination, billing, and collection, to:

(1) Collect reimbursement for the costs of providing such services to persons who are entitled to insurance benefits under the Social Security Act, including programs under title XVIII and title XIX, any State compensation program, any other public assistance program for medical expenses, any grant program, any private health insurance, or any other benefit program; and

(2) Secure from patients or clients payments for services in accordance with their ability to pay.

CERTIFICATION OF TUBERCULOSIS SERVICES*

(Complete *either* items 1 and 2; *or* 3, including all attachments for 3.)

- 1) ☐ **I hereby certify** that this County has in place policies, procedures, and practices to ensure compliance with the terms of the Net Negotiated Amount (NNA) contract and Title 45, Code of Federal Regulations, Part 96, Section 96.127 concerning providing tuberculosis services.
AND
- 2) ☐ **I certify:**
- ☐ that the County has in place policies, procedures, and practices to ensure that its AOD treatment subcontractors are in compliance with the above requirements;
OR
☐ Certification regarding treatment subcontractors is not applicable because this County does not subcontract for any AOD treatment services.
- 3) ☐ **I cannot certify** that this County has in place policies, procedures, and practices to ensure compliance with the terms of the Net Negotiated Amount (NNA) contract and Title 45, Code of Federal Regulations, Part 96, Section 96.127 with regard to the provision of tuberculosis services. Attached is:
- a) A statement of the reasons why the requirements are not met, **AND**
b) A corrective action plan, detailing actions to be completed within 60 days of the date of this document. (Attach pages.)

*Title 45, Code of Federal Regulations, Part 96, Section 96.127 states:

- (a) ...any entity receiving amounts from the grant for operating a program of treatment for substance abuse to follow procedures developed by the principal agency of a State for substance abuse, in consultation with the State Medical Director for Substance Abuse Services, and in cooperation with the State Department of Health/Tuberculosis Control Officer, which address how the program—
- (1) Will, directly or through arrangements with other public or nonprofit private entities, routinely make available tuberculosis services as defined in §96.121 to each individual receiving treatment for such abuse;
- (2) In the case of an individual in need of such treatment who is denied admission to the program on the basis of the lack of the capacity of the program to admit the individual, will refer the individual to another provider of tuberculosis services; and
- (3) Will implement infection control procedures established by the principal agency of a State for substance abuse, in cooperation with the State Department of Health/Tuberculosis Control Officer, which are designed to prevent the transmission of tuberculosis, including the following:

(i) Screening of patients; (ii) Identification of those individuals who are at high risk of becoming infected; and (iii) Meeting all State reporting requirements while adhering to Federal and State confidentiality requirements, including 42 CFR part 2; and
(4) will conduct case management activities to ensure that individuals receive such services.

(b) The State shall develop effective strategies for monitoring programs compliance with this section. States shall report under the requirements of § 96.122(g) on the specific strategies to be used to identify compliance problems and corrective actions to be taken to address those problems. The principal agency, in cooperation with the State Department of Health/Tuberculosis Control Officer, shall also establish linkages with other health care providers to ensure that tuberculosis services are routinely made available. All individuals identified with active tuberculosis shall be reported to the appropriate State official as required by law and consistent with paragraph (a)(3)(iii) of this section.

(c) With respect to services provided for by a State for purposes of compliance with this section, the State shall maintain Statewide expenditures of non-Federal amounts for such services at a level that is not less than an average level of such expenditures maintained by the State for the 2-year period preceding the first fiscal year for which the State receives such a grant. In making this determination, States shall establish a reasonable funding base for fiscal year 1993. The base shall be calculated using Generally Accepted Accounting Principles and the composition of the base shall be applied consistently from year to year.

Title 45, Code of Federal Regulations, Part 96, Section 96.121 defines tuberculosis services as:

- (1) Counseling the individual with respect to tuberculosis;
- (2) Testing to determine whether the individual has been infected with mycobacteria tuberculosis to determine the appropriate form of treatment for the individual; and
- (3) Providing for or referring the individuals infected by mycobacteria tuberculosis for appropriate medical evaluation and treatment.

CERTIFICATION OF YOUTH TREATMENT SERVICES*
(Complete *either* items 1 and 2; *or* 3, including all attachments for 3.)

- 1) ☐ **I hereby certify** that this County has in place policies, procedures, and practices to ensure compliance with the terms of the Net Negotiated Amount (NNA) contract with regard to the provision of youth treatment services.

AND

- 2) ☐ **I certify:**
- ☐ that the County has in place policies, procedures, and practices to ensure that its AOD treatment subcontractors are in compliance with the above requirements;
 - OR**
 - ☐ Certification regarding treatment subcontractors is not applicable because this County does not subcontract for any AOD treatment services.

- 3) ☐ **I cannot certify** that this County has in place policies, procedures, and practices to ensure compliance with the terms of the Net Negotiated Amount (NNA) contract with regard to the provision of youth treatment services. Attached is:
- a) A statement of the reasons why the requirements are not met, **AND**
 - b) A corrective action plan, detailing actions to be completed within 60 days of the date of this document. (Attach pages.)

*NNA contract, Exhibit C, Article I., Formation and Purpose, Paragraph B. Control Requirements, Item 9 states:

Contractor shall follow the guidelines in Document 1V, incorporated by this reference, "Youth Treatment Guidelines", Revised August 2002 in developing and implementing youth treatment programs funded under Exhibit C.

CERTIFICATION OF CONFIDENTIALITY OF CLIENT RECORDS*

(Complete *either* items 1 and 2; *or* 3, including all attachments for 3.)

- 1) ☐ **I hereby certify** that this County has in place policies, procedures, and practices to ensure compliance with the terms of the Net Negotiated Amount Contract (NNA) and the SAPT BG guidelines with regard to confidentiality of client treatment records and other confidential information.

AND

- 2) ☐ **I certify:**

☐ that the County has in place policies, procedures, and practices to ensure that its AOD treatment subcontractors are in compliance with the above requirements;

OR

☐ Certification regarding treatment subcontractors is not applicable because this County does not subcontract for any AOD treatment services.

- 3) ☐ **I cannot certify** that this County has in place policies, procedures, and practices to ensure compliance with the terms of the Net Negotiated Amount Contract (NNA) and the SAPT BG guidelines with regard to confidentiality of client treatment records and other confidential information. Attached is:

a) A statement of the reasons why the requirements are not met, **AND**

b) A corrective action plan, detailing actions to be completed within 60 days of the date of this document. (Attach pages.)

*Title 45, Code of Federal Regulations, Part 96, Section 96.132(e) states:

The State is also required to have in effect a system to protect from inappropriate disclosure patient records maintained by the State in connection with an activity funded under the program involved or by any entity which is receiving amounts from the grant and such system shall be in compliance with all applicable State and Federal laws and regulations, including 42 CFR Part 2. This system shall include provisions for employee education on the confidentiality requirements and the fact that disciplinary action may occur upon inappropriate disclosures. This requirement cannot be waived.

CERTIFICATION OF CONTINUING EDUCATION FOR EMPLOYEES*

(Complete *either* items 1 and 2; *or* 3, including all attachments for 3.)

- 1) ☐ **I hereby certify** that this County has in place policies, procedures, and practices to ensure compliance with the terms of the Net Negotiated Amount (NNA) and the SAPT BG guidelines with regard to continuing education for employees.

AND

- 2) ☐ **I certify:**
- ☐ that the County has in place policies, procedures, and practices to ensure that its AOD treatment subcontractors are in compliance with the above requirements;
 - OR**
 - ☐ Certification regarding treatment subcontractors is not applicable because this County does not subcontract for any AOD treatment services.

- 3) ☐ **I cannot certify** this County has in place policies, procedures, and practices to ensure compliance with the terms of the Net Negotiated Amount (NNA) and the SAPT BG guidelines with regard to continuing education for employees. Attached is:
- a) A statement of the reasons why the requirements are not met, **AND**
 - b) A corrective action plan, detailing actions to be completed within 60 days of the date of this document. (Attach pages.)

*Title 45, Code of Federal Regulations, Part 96, Section 96.132(b) states:

With respect to any facility for treatment services or prevention activities that is receiving amounts from a Block Grant, continuing education in such services or activities (or both, as the case may be) shall be made available to employees of the facility who provide the services or activities. The States will ensure that such programs include a provision for continuing education for employees of the facility in its funding agreement.

CERTIFICATION OF NONDISCRIMINATION*

(Complete *either* items 1 and 2; *or* 3, including all attachments for 3.)

- 1) ☐ **I hereby certify** that this County has in place policies, procedures, and practices to ensure compliance with the terms of the NNA contract and the SAPT BG guidelines with regard to compliance with the "Nondiscrimination in Services" and "Nondiscrimination in Employment" sections of the NNA contract.

AND

- 2) ☐ **I certify:**
- ☐ that the County has in place policies, procedures, and practices to ensure that its AOD treatment subcontractors are in compliance with the above requirements;
 - OR**
 - ☐ Certification regarding treatment subcontractors is not applicable because this County does not subcontract for any AOD treatment services.

- 3) ☐ **I cannot certify** this County has in place policies, procedures, and practices to ensure compliance with the terms of the NNA contract and the SAPT BG guidelines with regard to compliance with the "Nondiscrimination in Services" and "Nondiscrimination in Employment" sections of the NNA contract. Attached is:

- a) A statement of the reasons why the requirements are not met, **AND**
- b) A corrective action plan, detailing actions to be completed within 60 days of the date of this document. (Attach pages.)

*Paraphrased, the NNA contract, Exhibit B, Paragraphs P and Q states:

County should have in place written policies regarding nondiscrimination on the basis of race, color, creed, etc, and shall include nondiscrimination and compliance provisions in all subcontracts.

Contractor and its subcontractors shall ensure that the evaluation and treatment of their employees and applicants for employment are free from discrimination and harassment.

Contractors shall include the nondiscrimination and compliance provisions in all subcontracts.